OPT/MA//ERHZ" OPTIMA WERKZ PTE LTD Co. Reg. No. 201212455W

SINGAPORE

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/OptimaWerkz

Date:

20/03/2023

Vehicle No: SNB6040T

Not Nothers

Russing Afric Ging Third Party Insurer:
Third Party Veh No:
HYBRID 1.5G

John Date of Accident:
Estimator:

BUDGET DIRECT

Model:

HONDA FREED HYBRID 1.5G

SLD3844Y

Chassis:

GB71079941-2018

18/03/2023

Reg. Year:

2021

TING AN

Surveyor:

LKK Kenneth 28/03/2023 @ 13:00pm

ESTIMATE

NO.	DESCRIPTION	QTY	UNIT S\$	AMOUNT S\$
1	REAR TAILGATE	1		
2	REAR TAILGATE "HYBRID" EMBLEM	1		\$61.70
3	REAR TAIGLATE "FREED" EMBLEM	1		h \$48.60
4	REAR WINDSCREEN MOULDING	1		\$56.20
5	REAR BUMPER	1	\	REPAIR
			SUB TOTAL	\$1,198.80
			LESS 20%	-\$239.76
			PARTS TOTAL	\$959.04

NO.	SPECIAL NETT	QTY	UNIT S\$	AMOUNT S\$
1	REAR WINDSCREEN SEALANT	1		~~ \$80.00
2	REAR TAILGATE INNER TRIM BOARD CLIPS	1		\$40.00
			4	
			S/N TOTAL	\$120.00

LABOUR CHARGES:

LABOUR CHARGES TO REMOVE, REPLACE, REFIX, REPAIR & READJUST REAR ACCIDENT AREAS & ETC.

\$500.00 300

LABOUR CHARGES FOR PAINTING & TO SUPPLY PAINT & FURNISHING MATERIALS AT

REAR TAILGATE, REAR BUMPER & ETC.

\$500.00 800

LABOUR CHARGES TO REMOVE & REFIX REAR WINDSCREEN GLASS, REAR WINDSCREEN MOULDING, REAR WINDSCREEN SEALANT & ETC.

~~ \$150.00 X

LABOUR CHARGES TO REMOVE & REINSTALLED REAR TAILGATE INNER MECHANSIM & ETC. BACK TO ORIGINAL OPERATIONS.

\$120.00 X

TO CHECK WIRING & ELECTRICAL SYSTEM.

LKK Auto Consultants hence notify the Repairer of the following: \$80.00 15/ To resurvey before/after spray painting To display damaged part(s) during BONR TOTAL \$1,350.00 Parts prices are subject to confirmation Third party survey is on a "Without Prejudice" basis
 No illegal modification(s) is allower TAL \$2,429.04

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 Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Oupany

6 Kung Chong Road Singapore 159143 Tel: (-65) 6472 1313 | Fax. (-65) 6472 2112

Branch Tel. (-65) 6484 9919 Fax

Date:

Acknowledged by Recaller Insurance Claims)

Acknowledged by Recaller Insurance Claims)

Acknowledged by Recaller Insurance Claims)

Acknowledged by Recaller Insurance Claims)

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.

2. This Form must be completed by the Policyholder and/or the Actual Driver

3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate

4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.

5. Any false reporting may be referred to the Police for Investigation.
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving

7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date of Submission 20/03/2023 21:53 (SGT)

Reported by Driver

Date of Accident 18/03/2023 13:39 (SGT)

Exact Location of Accident Singapore

Additional Location Information **DUNEARN RD TOWARDS WHITLEY RD**

Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number **SNB6040T**

INSURED/POLICYHOLDER

Is company? Yes

Name Of Registered Owner KINETIC REGENCY PTE LTD

Company Reg No 201632177M

Email Address support@kinetic-alliance.com Mobile Phone No (Phone) +65-97849075

Alternative Phone No

VEHICLE PARTICULARS

Honda Manufacturer

Freed Model Variant

Exact purpose for which vehicle was being used at time of Private hire

accident Are you claiming under your own insurance policy for repair to

No - Claiming third party your vehicle? Private hire

Vehicle Category Transmission Auto

CC 1500

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.

Policy Number / Cover Note Number DMHCSNA00009402202

DRIVER

Name of Driver **LINDA HARYONO** S7884252J NRIC No Date Of Birth 16/04/1978 Occupation Outdoor

SNETCHALAN

SNB 60407 (china) Dog. 18/13/23@1339

1. Passe report some ted by the Policyholder and/or the Australian process.

1. Please report correction that the Policyholder and/or the Authorised Driver.

2. This Form must be as truthful and accurate as possible. Amy superior provided must be as truthful and accurate as possible. 1. Please report to a complete a usual securate as possible. Any wiful misrepresentation or withholding of material facts may a promision provided must be as truthful and accurate as possible. Any wiful misrepresentation or withholding of material facts may appropriate companies to repudiate policy liability. 3 Morration provides to repudiate policy liability.

3 promision programmes to resumment to the Formby insurance companies is not an admission of policy liability on the part of the insurance 4 me issue and acceptance of this Formby insurance companies is not an admission of policy liability on the part of the insurance 4 me issue and acceptance of this Formby insurance companies.

companies.

5. Any false reporting may be referred to the Police for investigation. 6. The report will for archiving and that copies of this report will for a fee be made available upon application by interest association 5. ADVISION WE'RE forwarded by the General Insurance Associated the report will for a fee be made available upon application by interested parties, of singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties, of Singapore (GIA) for an interested parties, you hereby consent to the archiving of this report at the centre and to copies of the 7. By the loggement of this report at the centre and to copies of the 7. by the argument available af ores aid. report peny moder the Personal Data Protection Act (PDPA)

Junderstand, acknowledge, agree and consent that

Junderstand, accurate workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose (a) My insurer, my workshop and the General Information set out in this [form] and any other personal information set out in this [form] and any other personal information set out in this [form] and any other personal information set out in this [form] and any other personal information set out in this [form] and any other personal information set out in this [form] and any other personal information set out in this [form] and any other personal information set out in this [form] and any other personal information set out in this [form] and any other personal information set out in this [form] and any other personal information set out in this [form] and any other personal information set out in this [form] and any other personal information set out in this [form] and any other personal information set out in this [form] and any other personal information set out in this [form] and any other personal information set out in this [form] and any other personal information set out in this [form] and any other personal information set out in this [form] and any other personal information set out in this [form] and any other personal information set out in this [form] and [(a) My insurer in working a data/personal information set out in this [form] and any other personal information provided by me or and/or process my personal information provided by me or and/or process my personal information provided by me or and/or process my personal information provided by me or and disclose and transfer and or provided by me or and or process my personal information provided by me or and or process my personal information provided by me or and or process my personal information provided by me or and or process my personal information provided by me or and or process my personal information set out in this [form] and any other personal information provided by me or and or process my personal information provided by me or and or provided by me or and or provided by me or and or provided by me or an analysis of the process my personal information provided by me or an analysis of the process my personal information provided by me or an analysis of the process my personal information provided by me or an analysis of the process my personal information provided by me or an analysis of the process my personal information provided by me or an analysis of the process my personal information provided by me or an analysis of the process my personal information provided by me or an analysis of the process my personal information provided by me or an analysis of the process my personal information provided by me or an analysis of the process my personal information provided by me or an analysis of the process my personal information provided by me or an analysis of the process my personal information provided by me or an analysis of the process my personal information process my personal and/or process to pursuit representation of the personal information and disclose and transfer such Personal information to all insurer(s) possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) possessed by my moved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be who have insured vehicle(s) involved in this accident shall be who have another the "Insurers"), the Insurers' law yers/law firms, the Monetary Authority of Singapore and any relevant collectively referred to as the "Insurers" have the notice). For the respectful of government agency/authority (such as the police), for the purpose(s) of :

government of the claims and any necessary investigations relating to the claims

(ii) investigating the accident and/or my claims;

(ii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

(collectively the "Purposes")

(b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' law yers/law firms, may/are permitted to collect. use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(c) my Personal information may/can be disclosed by any of the insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be stied outside of Singapore, for one or more of the above Purposes.

20 3 Driver's Signature (If driver is not the policyholder) / Date

23

Witnessed by Reporting Cent Personnel DUNYN (NIMK)

Policyholder's Signature / Date & Time

Sketch Plan MAINTEN

& Time